

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO.	FILING DATE
APPLICANT(S)	

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		CLAIMS
	IND	DEP	IND	DEP	IND	DEP	
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50							
TOTAL IND.	2						
TOTAL DEP.	9						
TOTAL CLAIMS	11						

	IND	DEP	IND	DEP	IND	DEP
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